

RECEIVED
CLERK'S OFFICE
2025 JUN 27 PM 3:47

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

25 CV 5436

Carlita Blanco
Amazing Great Beauty of Science
CV _____

Write the full name of each plaintiff.

(Include case number if one has been assigned)

-against-

COMPLAINT

The National Science Foundation
(Discretionary Research)
HUD - CDC
Unsolicited Research Partnerships

Do you want a jury trial?

☒ Yes ☐ No

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

☐ Federal Question

☐ Diversity of Citizenship

A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

*Executive Order, ^{value} 14026, 13548 - Agency -
was not ADA Compliance but use provisions/resa
to full filled it own agenda - escape velocity
by using local government ACS violate - Case*

B. If you checked Diversity of Citizenship**1. Citizenship of the parties**

Of what State is each party a citizen?

The plaintiff, Carlita Blanco, is a citizen of the State of
(Plaintiff's name)

New York / California

(State in which the person resides and intends to remain.)

*ADA violation
Research - Theft
Research manipulation
Slavery violations*

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of

If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:

The defendant, The National Science Foundation, is a citizen of the State of
(Defendant's name)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of _____

If the defendant is a corporation:

The defendant, _____, is incorporated under the laws of the State of _____

and has its principal place of business in the State of _____

or is incorporated under the laws of (foreign state) _____

and has its principal place of business in _____

If more than one defendant is named in the complaint, attach additional pages providing information for each additional defendant.

II. PARTIES

A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional pages if needed.

Carlota Blanco
First Name Middle Initial Last Name

101 Lincoln Avenue
Street Address

Bronx NY 10454
County, City State Zip Code

646 504 3291 theagburl@gmail.com
Telephone Number Email Address (if available)

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1: * Betty Tuller -
 First Name Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City State Zip Code

Defendant 2: * Ben Shrag
 First Name Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City State Zip Code

Defendant 3:
 First Name Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City State Zip Code

Defendant 4:

First Name

Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

III. STATEMENT OF CLAIM

Place(s) of occurrence:

DC / NY / CA

Plus
HUD Regions

Date(s) of occurrence:

2019 - 2024

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

Due to the Nature of this case
SF-312 was signed to protect other Federal
agencies during the development
for nationwide system updates -

I cannot disclose details under
that direct order.

Plaintiff is only requesting wages,
401 K for retirement.

Plaintiff request direct deposit
immediately 5 CFR 1315 -

I want my research grant
period

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

Lost - Wages & Unpaid Invoices,
Systematic retaliations within Local
Government.

IV. RELIEF

State briefly what money damages or other relief you want the court to order.

I, Carlota Blanes requesting shared cost
with HUD - Labor & Wages @ GS 14 -
GS-15 ^{rate} wages, plus labors and a
contract for monitoring completed development
Requesting PIV card & ~~compa~~ gov vehicle

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

June 16 2025
Dated

[Signature]
Plaintiff's Signature

Carlita

Blanco

First Name

Middle Initial

Last Name

101 Lincoln Avenue
Street Address

Bx

NY

10454

County, City

State

Zip Code

646 504 3291

theagbsunb@gmail.com
Email Address (if available)

Telephone Number

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

☒ Yes ☐ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.